



## A FACT SHEET FOR PROVIDERS

### Influenza Vaccination Recommendations: Summary Guide 2004-05

This fact sheet summarizes the Advisory Committee on Immunizations Practices' influenza vaccination recommendations for the 2004-05 influenza season.

#### Flu Vaccine

There are 2 types of influenza vaccine: an injectible "flu shot" and a nasal-spray vaccine.

- The flu shot contains killed virus. It is approved for use in people older than 6 months, including healthy people and people with chronic medical conditions.
- The nasal-spray vaccine (Live Attenuated Influenza Vaccine or LAIV) contains weakened live viruses. It is approved for use in healthy people 5 years to 49 years of age who are not pregnant.

#### Who Should Be Vaccinated

People who should be vaccinated include:

1. **People at high risk for complications from influenza.** This includes:
  - **People 65 years and older;**
  - **People** who live in **nursing homes** and other **long-term care facilities** that house those with long-term illnesses;
  - **Adults and children 6 months and older** with **chronic heart or lung conditions**, including asthma;
  - **Adults and children 6 months and older** who needed **regular medical care** or were **in a hospital during the previous year** because of a **metabolic disease** (like diabetes), **chronic kidney disease**, or **weakened immune system** (including immune system problems caused by medicines or by infection with HIV/AIDS);
  - **Children 6 months to 18 years** of age who are on **long-term aspirin therapy**. (If given aspirin while they have influenza, they are at risk of Reye syndrome.);
  - **Women who will be pregnant** during the influenza season; and
  - **All children 6 to 23 months of age.**
2. **People 50 to 64 years of age.** (Nearly one-third of people 50 to 64 years of age in the United States have one or more medical conditions that place them at increased risk for serious complications from influenza.)
3. **People who can transmit influenza to others at high risk for complications.** This includes:
  - **Children and adults who live with someone in a high-risk group, including people who live with children less than 2 years of age;**
  - **Doctors, nurses, and other employees in hospitals and doctors' offices**, including emergency response services;
  - People who **work in nursing homes and long-term care facilities** who have contact with patients or residents;
  - People who **work in assisted living and other residences** for people in high-risk groups; and
  - Anyone who **provides care to those in high-risk groups** (including children under the age of 2).

## **Vaccine Information for Other Groups**

### ***General Population***

- **Anyone who wants to lower their chances of getting influenza** should be vaccinated if they do not have contraindications to receiving influenza vaccine.
- Vaccination should be considered for **people who provide essential community services** (such as police officers and firefighters) to minimize disruption of key public-service activities during influenza outbreaks.
- Vaccination should be encouraged for **students living in dormitories** or **anyone living in an institutional setting** since crowded living conditions may mean influenza can spread more easily.

### ***Breastfeeding Mothers***

- **Breastfeeding women** can be vaccinated. Antibody against influenza is passed in breast milk and may offer additional protection against influenza for infants.

### ***Travelers***

The risk of getting influenza during travel depends on the destination and time of travel. In the tropics, influenza can occur year-round. In the Southern Hemisphere, most influenza activity occurs April through September. Travelers also can be exposed during the summer, especially when traveling in tourist groups that include people from parts of the world where influenza virus is circulating.

Depending on the health condition of prospective travelers, **providers should consider vaccinating people at high risk for influenza-related complications**, especially if they plan to:

- travel to the tropics;
- travel with large tourist groups at any time of year; or
- travel to the Southern Hemisphere from April through September

Also, **providers** may want to **consider prescribing antiviral medications** for prevention or treatment to **people 50 years and older at high risk for influenza complications who cannot be vaccinated**.

### **Who Should Not Be Vaccinated**

The following people should not be vaccinated:

- People who have a severe allergy (anaphylactic hypersensitivity) to chicken eggs. (Vaccination may still be considered in high-risk people, but only after an appropriate allergy evaluation and desensitization);
- People who have had a severe reaction to an influenza vaccination in the past. (Vaccination may still be considered in high-risk people, but only after an appropriate allergy evaluation and desensitization);
- People who developed Guillain-Barré syndrome (GBS) ([www.cdc.gov/ncidod/diseases/flu/vacfacts.htm#16](http://www.cdc.gov/ncidod/diseases/flu/vacfacts.htm#16)) within 6 weeks of getting an influenza vaccine previously. (Currently, there is no evidence that influenza vaccination increases the risk of GBS recurrence in people with prior GBS unrelated to influenza vaccination);
- Children less than 6 months of age.
- People with an acute febrile illness. (These people may be vaccinated once their symptoms have lessened. Minor illnesses are not a contraindication to vaccination.

Prophylactic use of antiviral agents is an option for preventing influenza among such people.

The full Recommendations of the Advisory Committee on Immunization Practices (ACIP) on the Prevention and Control of Influenza can be found at [www.cdc.gov/mmwr/preview/mmwrhtml/rr5306a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5306a1.htm).

For more information, visit [www.cdc.gov/flu](http://www.cdc.gov/flu) or call the National Immunization hotline at (800)232-2522 (English), (800)232-0233 (Spanish), or the CDC clinician hotline at 877-554-4625.